



ANNUAL ENROLLMENT FOR 2019 BENEFITS

October 1-26, 2018, at 4:30 p.m. Central time
tn.gov/partnersforhealth



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Welcome to the annual enrollment webinar for 2019 benefits.

Enrollment will take place from October 1-12, 2018, ending at 4:30 p.m. central time on October 12

You can find more information on your benefits at tn.gov/partnersforhealth

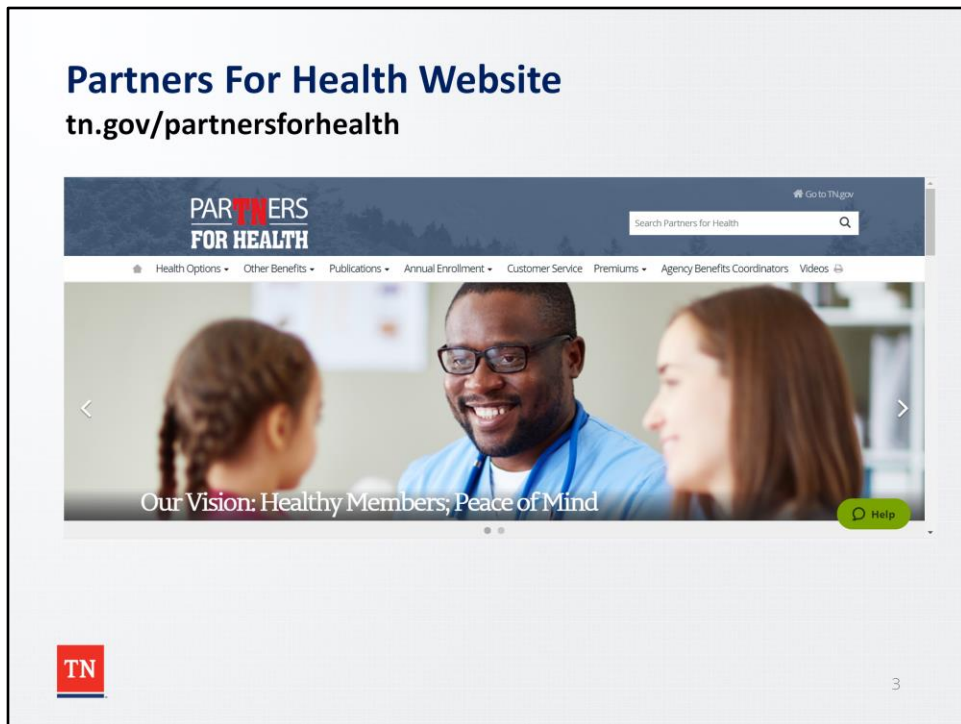
What will we cover today?

1. Partners For Health website
2. Changes for 2019
3. 2019 Premiums
4. Plan Options
5. Health Savings Account (HSA) and common eligible expenses
6. Telehealth
7. Employee Assistance Program and Behavioral Health
8. Wellness Program
9. Pharmacy
10. Dental
11. Vision
12. Enrollment



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We have a very full agenda today. We will be covering the following topics: Partners For Health website, changes for 2019, 2019 premiums, plan options, health savings account (hsa) and common eligible expenses, telehealth, employee assistance program and behavioral health, wellness program, pharmacy, dental, vision and enrollment.



We are going to briefly over the Partners For Health website. Review the following:

Top Navigation (Health Options, Other Benefits, Publications, Annual Enrollment, Customer Service, Premiums and Videos)

Spend a little extra time going over the Customer Service tab.

Help Button

Social Media feed

“Questions” button

Quick link boxes

Important 2019 Updates

- **Local Education-Health insurance premiums will increase by 2.5%**
- **Local Government-Health insurance premiums will increase by 2%**
- Same health plans as last year (Premier PPO, Standard PPO, Limited PPO and Consumer-Driven Health Plan/Health Savings Account (CDHP/HSA))
- Same network options-BlueCross BlueShield Network S, Cigna Local Plus, Cigna Open Access Plus (OAP)
- Copays, coinsurance and deductibles are staying the same for all plans, except the Limited PPO—deductibles and maximum out-of-pocket will increase. Also in the Limited PPO, there will no longer be a \$100 pharmacy deductible.
- MetLife dental plan-premiums will increase 2%



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Changes are minimal this year, but we do have a few important changes:

- **Local Education-Health insurance premiums will increase by 2.5%**
- **Local Government-Health insurance premiums will increase by 2%**
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- MetLife dental plan-premiums will increase 2%

2019 Premiums

Local Education
Active Employee Monthly Health Premiums
Premiums will increase by 2.5%

| ALL REGIONS | | | |
|--------------------------------|---------|-----------------|-------------------|
| | BCBST | CIGNA LOCALPLUS | CIGNA OPEN ACCESS |
| PREMIER PPO | | | |
| Employee Only | \$627 | \$627 | \$667 |
| Employee + Child(ren) | \$1,034 | \$1,034 | \$1,074 |
| Employee + Spouse | \$1,223 | \$1,223 | \$1,303 |
| Employee + Spouse + Child(ren) | \$1,630 | \$1,630 | \$1,710 |
| STANDARD PPO | | | |
| Employee Only | \$587 | \$587 | \$627 |
| Employee + Child(ren) | \$969 | \$969 | \$1,009 |
| Employee + Spouse | \$1,146 | \$1,146 | \$1,226 |
| Employee + Spouse + Child(ren) | \$1,526 | \$1,526 | \$1,606 |
| LIMITED PPO | | | |
| Employee Only | \$537 | \$537 | \$577 |
| Employee + Child(ren) | \$885 | \$885 | \$925 |
| Employee + Spouse | \$1,047 | \$1,047 | \$1,127 |
| Employee + Spouse + Child(ren) | \$1,395 | \$1,395 | \$1,475 |
| LOCAL CDHP/HSA | | | |
| Employee Only | \$456 | \$456 | \$496 |
| Employee + Child(ren) | \$751 | \$751 | \$791 |
| Employee + Spouse | \$889 | \$889 | \$969 |
| Employee + Spouse + Child(ren) | \$1,184 | \$1,184 | \$1,264 |

The premium amounts shown reflect the total monthly premium. Please see your agency benefits coordinator for your monthly deduction, the state's contribution and your employer's contribution, if applicable.



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Your premiums are on the screen. As a reminder, premiums will increase by 2.5%

You can also find your premiums at tn.gov/partnersforhealth on the annual enrollment or the premiums page.

2019 Premiums

Local Government
Active Employee Monthly Health Premiums
Premiums will increase by 2%

| ALL REGIONS | | | | | | |
|--------------------------------|-------------------------|-------------------|-------------------------|-------------------|-------------------------|-------------------|
| | LEVEL 1 | | LEVEL 2 | | LEVEL 3 | |
| | BCBST & CIGNA LOCALPLUS | CIGNA OPEN ACCESS | BCBST & CIGNA LOCALPLUS | CIGNA OPEN ACCESS | BCBST & CIGNA LOCALPLUS | CIGNA OPEN ACCESS |
| PREMIER PPO | | | | | | |
| Employee Only | \$662 | \$702 | \$740 | \$780 | \$804 | \$844 |
| Employee + Child(ren) | \$1,027 | \$1,067 | \$1,146 | \$1,186 | \$1,246 | \$1,286 |
| Employee + Spouse | \$1,424 | \$1,504 | \$1,590 | \$1,670 | \$1,729 | \$1,809 |
| Employee + Spouse + Child(ren) | \$1,789 | \$1,869 | \$1,997 | \$2,077 | \$2,172 | \$2,252 |
| STANDARD PPO | | | | | | |
| Employee Only | \$620 | \$660 | \$693 | \$733 | \$753 | \$793 |
| Employee + Child(ren) | \$962 | \$1,002 | \$1,074 | \$1,114 | \$1,168 | \$1,208 |
| Employee + Spouse | \$1,334 | \$1,414 | \$1,489 | \$1,569 | \$1,620 | \$1,700 |
| Employee + Spouse + Child(ren) | \$1,676 | \$1,756 | \$1,871 | \$1,951 | \$2,034 | \$2,114 |
| LIMITED PPO | | | | | | |
| Employee Only | \$481 | \$521 | \$538 | \$578 | \$585 | \$625 |
| Employee + Child(ren) | \$747 | \$787 | \$834 | \$874 | \$907 | \$947 |
| Employee + Spouse | \$1,036 | \$1,116 | \$1,157 | \$1,237 | \$1,258 | \$1,338 |
| Employee + Spouse + Child(ren) | \$1,302 | \$1,382 | \$1,452 | \$1,532 | \$1,580 | \$1,660 |
| LOCAL CDHP/NSA | | | | | | |
| Employee Only | \$434 | \$474 | \$483 | \$523 | \$525 | \$565 |
| Employee + Child(ren) | \$671 | \$711 | \$750 | \$790 | \$815 | \$855 |
| Employee + Spouse | \$931 | \$1,011 | \$1,039 | \$1,119 | \$1,130 | \$1,210 |
| Employee + Spouse + Child(ren) | \$1,170 | \$1,250 | \$1,306 | \$1,386 | \$1,420 | \$1,500 |

The premium amounts shown reflect the total monthly premium. The different premium levels are based on the demographics of your agency. Please see your agency benefits coordinator for your monthly deduction, your employer's contribution or if you are unsure as to which premium level applies to you.



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You can also find your premiums at tn.gov/partnersforhealth on the annual enrollment or the premiums page.

Health Benefits



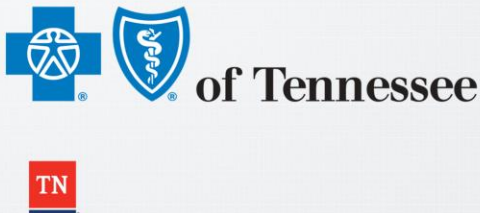
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We are going to start out with a discussion about your health benefits.

Networks

You have the choice of three networks of doctors and facilities. Please ensure that employees check the network for their providers as changes can occur

- BlueCross BlueShield Network S
- Cigna LocalPlus (LP)
- Cigna Open Access Plus (OAP)- this is a larger, broad network but costs much more each month



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Discount Programs

- **BCBS Blue365®** offers national and local discounts on products and services that can help keep you healthy. It's included with your health plan and doesn't cost you anything extra. These discounts include categories for financial health, fitness, healthy eating, lifestyle, personal care and wellness.
- **Fitness Your Way is a gym membership program** included as part of Blue365:
- For a one-time \$29 enrollment fee and \$29 per month (plus local tax and a 3-month commitment) you get access to 9,500 gyms and fitness centers nationwide.
- **CIGNA Healthy Rewards** offers discounts on a wide variety of health and wellness programs and services, including includes a nationwide network of brand name as well as smaller local participating providers. Discounts include categories for weight management and nutrition, **fitness clubs and equipment**, mind/body programs and equipment, vision and hearing care, alternative medicine and vitamins, health and wellness products.
- The **Active&Fit Direct program** is a fitness center program included as part of Cigna Healthy Rewards
- For a one-time \$25 enrollment fee, \$25 for the current month (regardless of the enrollment date within that month) and \$25 per month thereafter (plus applicable taxes and a 3-month commitment) you get access to more than 9,000 participating fitness centers nationwide.



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Plans

- State offers four health plan options:
 - Premier PPO
 - Standard PPO
 - Limited PPO
 - Local CDHP/HSA
- A PPO is a Preferred Provider Organization
- How a PPO Works:
 - Members have access to a network of doctors and facilities that charge pre-negotiated fees
 - The member may pay **more** for services from **out-of-network** providers



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out-of-network providers

Local CDHP/HSA

With a Local CDHP/HSA you have:

- Lower premiums and higher deductibles
- Coinsurance payments instead of copays
- A health savings account (HSA)
- You can use the money in your account to pay your deductible and other healthcare costs or save it.



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With a CDHP/HSA you have:

Lower premiums and a higher deductible

Coinsurance payments instead of copays: With the premier ppo, you'll pay a \$25 copay for a primary care visit. With the CDHP, you have to first pay your deductible before the plan pays anything for most services and then you pay coinsurance, not copays.

Health Savings Account: A health savings account is opened automatically for anyone who enrolls in the CDHP/HSA

You can use the money in your account to pay your deductible and other healthcare costs or save it. There are other eligible expenses that are not your deductible and coinsurance.

Telehealth

You can talk to a doctor by phone or computer from anywhere, at anytime, and at a lower cost than a typical office visit.

When to use Telehealth

- For non-emergency medical issues(allergies, asthma, bronchitis, cold & flu, infections, fever, ear aches, nausea, pink eye, sore throat)
- 24 hours a day, seven days a week-including nights, weekends, and holidays
- Your doctor or pediatrician is unavailable
- You are traveling and need medical care

State-Sponsored Telehealth program cost

- PPO Members: Copay is \$15 (in-network)
- CDHP Members: You pay the negotiated rate per visit until you reach your deductible, then the primary care office visit coinsurance applies
- In order to utilize this service they must pre-register with their network carrier (BCBST or Cigna) and go through the network carrier programs (PhysicianNow, MDLive, or Amwell)



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- 24 hours a day, seven days a week-including nights, weekends, and holidays
- Your doctor or pediatrician is unavailable
- You are traveling and need medical care

State-Sponsored Telehealth program cost

- PPO Members: Copay is \$15 (in-network)
- CDHP Members: You pay the negotiated rate per visit until you reach your deductible, then the primary care office visit coinsurance applies

Employee Assistance Program (EAP)

- EAP administered by Optum
- Available to:
 - EAP services are available to all enrolled health plan members and eligible dependents, even if your dependents are not enrolled in a health plan.

Receive five EAP counseling visits, per situation, per year at no cost to you

- Master's level specialists available around the clock to assist with:
 - Stress, legal, financial, mediation and work/life services
 - Can even help you find a network provider, a plumber who works nights, services for your elderly parents, theater tickets, all-night pharmacies and much more.

855.Here4TN (855.437.3486) or HERE4TN.com



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- Available to:

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Receive five EAP counseling visits, per situation, per year at no cost to you

Behavioral Health & Substance Use Services

Dealing with a mental health or substance use condition? Support is available to you and your enrolled dependents through your behavioral health coverage.

- **Optum** is your behavioral healthcare vendor; Coverage is included when you enroll in a health plan
- Using Optum's network providers gets you the most from this benefit; You can search for providers on the website or call 855.Here4TN for assistance
- **Virtual Visits:**
 - In addition to office visits, you can meet with a provider through private, secure video conferencing called virtual visits
 - Allows you to get the care you need sooner and in the privacy of your home.
 - The copay for a Virtual Visit is the same as an office visit.
 - To get started, go to [Here4TN.com](https://www.here4tn.com), scroll down, select provider search, and click on Virtual Visit to find a provider licensed in TN, or call for assistance

855.Here4TN (855.437.3486) or [HERE4TN.com](https://www.here4tn.com)



Whether you are dealing with a mental health or substance use condition, support is available through your behavioral health coverage. Your enrolled dependents can use these benefits too.

Optum is your behavioral healthcare vendor. Using one of Optum's network providers gets you the most from this benefit, which is included when you and your dependents enroll in a health plan.

- In addition to office visits, you can meet with a provider through private, secure video conferencing. It's called **Virtual Visits**, and it allows you to get the care you need sooner and in the privacy of your home. The copay for a Virtual Visit is the same as an office visit.

- To get started, go to **Here4TN.com**, scroll down, select provider search, and click on Virtual Visit to find a provider licensed in Tennessee, or call 855-Here4TN for assistance.

Learn more about your behavioral health benefit by visiting **Here4TN.com**. A provider directory with a search feature is available on the website.

Wellness Program Vendors

- Population Health Program – ActiveHealth Management
- Program Go Live on January 1, 2019



The Wellness Program will be administered by ActiveHealth

Wellness Program Resources

- Diabetes Prevention Program
- Disease Management:
 - Diabetes
 - Asthma
 - Chronic Obstructive Pulmonary Disease (COPD)
 - Coronary Artery Disease (CAD)
 - Congestive Heart Failure (CHF)



These are some of the resources that will be available to you through the Wellness Program:

- Diabetes Prevention Program
- Disease Management:
 - Diabetes
 - Asthma
 - Chronic Obstructive Pulmonary Disease (COPD)
 - Coronary Artery Disease (CAD)
 - Congestive Heart Failure (CHF)

Pharmacy Benefits



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Pharmacy Benefits are administered by CVS/Caremark

Pharmacy Benefits

- Pharmacy benefits are included when enrolled in a health plan.
- Out of Pocket Pharmacy costs is based on two different factors:
 - The member's plan option, and
 - The drug level (tier) of the medication
- There are four drug levels:

| | | |
|--|-----------------|---|
| Generic Drug (Tier One) | Least Expensive | A generic medicine is FDA approved and equal to the brand name product in safety, effectiveness, quality and performance. |
| Preferred Brand (Tier Two) | More Expensive | Many popular and highly used preferred brands are included on the preferred drug list (PDL). |
| Non-Preferred Brand (Tier Three) | Most Expensive | These belong to the most expensive group of drugs. These drugs are not included on the PDL. |

Specialty drug tier: In the PPOs, 10% coinsurance applies with a member minimum (\$50, unless the drug cost is under \$50, then you would pay the full cost of the drug) and a maximum (\$150) out-of-pocket. Members enrolled in a CDHP pay coinsurance for specialty drugs.



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- Pharmacy benefits are included when enrolled in a health plan.
- Out of Pocket Pharmacy costs is based on two different factors:
 - The member's plan option, and
 - The drug level (tier) of the medication

Dental Benefits



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Dental Benefits are administered by MetLife and Cigna

Optional Dental Benefits

- Eligible LE/LG employees can choose between two dental plans:

Cigna Prepaid Plan

- Participating dentists only
- Fixed co-pays
- No deductibles
- No waiting periods
- Pre-existing conditions are covered
- Referrals to specialist are required
- Orthodontic treatment is not covered if the treatment plan began prior to the member's effective date of coverage with Cigna

MetLife DPPO Plan

- Any dentist
- Pay less with in-network providers
- Pay co-insurance for basic, major, orthodontic and out-of-network covered services.
- Some services require a waiting period
- Referrals to a specialists are not required

- Each year during the Annual Enrollment, eligible employees can enroll in or transfer between dental options
- Unlike health insurance where a portion of the premium is paid by the employer, dental insurance is paid 100% by the member



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Eligible employees can choose between two dental plans:

Cigna Prepaid Plan

- Participating dentists only
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- Pay co-insurance for basic, major, orthodontic and out-of-network covered services.
- Some services require a waiting period
- Referrals to a specialists are not required

2019 Dental Premiums

Active Employee Monthly Dental Premiums

Cigna premiums stay the same. MetLife premiums will increase by 2%.

| | CIGNA PREPAID PLAN | METLIFE DPP0 PLAN |
|--------------------------------|-----------------------|----------------------|
| ACTIVE MEMBERS | | |
| Employee Only | \$13.44 | \$23.64 |
| Employee + Child(ren) | \$27.91 | \$54.36 |
| Employee + Spouse | \$23.83 | \$44.72 |
| Employee + Spouse + Child(ren) | \$32.76 | \$87.50 |



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Here's a look at your 2019 dental premiums. Cigna premiums stay the same, but MetLife premiums will increase by 2%

Vision Benefits



DavisVisionTM



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Vision benefits are administered by DavisVision

Optional Vision Insurance

- Eligible LE/LG employees can choose between two vision plans:

Basic Plan

- Discounted rates
- Allowances

Expanded Plan

- Co-pays
- Allowances
- Discounted rates

- Administered by Davis Vision
- For a specific provider go to <http://www.davisvision.com/stateofTN>
- Each year during the Annual Enrollment, eligible employees can enroll in or transfer between vision plans
- Unlike health insurance where a portion of the premium is paid by the employer, vision insurance is paid 100% by the member



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Eligible employees can choose between two vision plans.

Basic Plan

- Discounted rates
- Allowances

Expanded Plan

- Co-pays
- Allowances
- Discounted rates

2019 Vision Premiums

Active Employee Monthly Vision Premiums

No premium increase.

| | BASIC PLAN | EXPANDED PLAN |
|--------------------------------|------------|---------------|
| ACTIVE MEMBERS | | |
| Employee Only | \$3.07 | \$5.56 |
| Employee + Child(ren) | \$6.13 | \$11.12 |
| Employee + Spouse | \$5.82 | \$10.57 |
| Employee + Spouse + Child(ren) | \$9.01 | \$16.35 |



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Here's a look at your 2019 vision premiums.

No changes to premiums for 2019.

Online Enrollment through ESS

- Members select health insurance and other benefit options online
- Log in to Edison www.edison.tn.gov
 - » Edison employee ID number provided by the Agency Benefits Coordinator
 - » Employees can utilize the First Time User/Password Reset link on the homepage to retrieve their access ID and password
 - » Click Self Service and follow prompts for enrollment
 - » A step-by-step guide is available on the ABC website
- If covering dependents, submit dependent verification by:
 - » Uploading documents via ESS
 - » Submit documents via document upload in Zendesk



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Questions?

